STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation (EC 23 '05

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077 S.D. SEC.			
1. TITLE OF NEWSPAPER The Pioneer Review 2. DATE 9-29-05			1-29-05
Weekly 52	Weekly 52 PRICE \$ 27.50 area are		out of area.
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP 4 Code) (Not printers) 221 East Date, POBOL 188			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE			
PUBLISHER (Not printers) Kavellette Publications Inc. Po Box 788 Philip SD 57567			
6. FULL NAME OF PUBLISHER: Donald Ravellette, POBOX 633 Philip SD 57567			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name			
and address, as well as that of each individual must be given. FULL NAME	COMPLETE MAILING ADDRESS		
on back			
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.			
on back			
	AVERAGE NO. COI EACH	PIES ACTU	AL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION ISSUED PRECEDING 12 MONTHS	G 12 NEAREST	ISSUED TO FILING DATE	
A.TOTAL NO. COPIES (Net Press Run)	1500	13	500
B.PAID AND/OR REQUESTED CIRCULATION1. Sales through dealers and carriers, street vendors and counter sales.	128	,	37
Mail Subscription (Paid and or requested)	1118	11	39
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	1246	12	76
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	45	10	00
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	16	1	4
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1357	13	92
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	117		81
2. Return from News Agents	26		27
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	1500	15	00
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete:			
Aprild Roublitte Presedent/Publish			
(Signature) (Title)			
State of South Dakota Sworm to before me this 4 day of 0ct, , 2005			
County of Hacakon)	Notary Public Not EXPIRES:		
(Seal)	My commission expires: 3-17-09		

Owners:

Ravellette Publications, Inc. P O Box 788 Philip, SD 57567-0788

Donald Ravellette P O Box 633 Philip, SD 57567-0633

Bondholders, Mortgages & Other Security Holders:

First National Bank P O Box 910 Philip, SD 57576-0910

Luella Belle Ravellette P O Box 375 Philip, SD 57567-0375